1171892

FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION C.E.C. Washington, D.C. 20549

080

## FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVA	AL	
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OMB Number: 3235-0076 Expires: December 31, 1996 Estimated average burden hours per response16.00

SEC USE	ONLY	
Prefix		Serial
DATE R	ECEIVED	

	(es) that apply): 🔲 Rule 504 🔲 Rule 505 🛛 🗷	Rule 506 $\square$ Section 4(6) $\square$	ULOE
Type of Filing: New	Filing Amendment		
-14.	A. BASIC IDENTIFI	ICATION DATA	
1. Euter the information	requested about the issuer		
	k If this is an amendment and name has changed, a	nd indicate change.)	02021003
HRI Holding Co., Inc.	_		02031993
Address of Executive Off	ices (Number and Street, City, State, Zip C	Code)   Telephone Number (I	ncluding Area Code)
1700 West Loop South, S	uite 1445, Houston, Texas 77027	(713) 622 4	033
Address of Principal Bus	iness Operations (Number and Street, City, State,	Zip Code   Telephone Number (	Including Area Code)
(if different from Execut	ve Offices)		
Brief Description of Busi	acss		DDACECCE
Water Infrastructure			<u>PROCESSE</u>
Type of Business Organia	eation		
-21 Parkin			
⊠ corporation	limited partnership, already formed	Other (please specif	y): / APR 3 0 2007
	☐ limited partnership, already formed ☐ limited partnership, to be formed	Other (please specif	APR 3 0 2007
☑ corporation ☐ business trust	☐ limited partnership, to be formed	Month Year	THOMSON
☑ corporation ☐ business trust	☐ limited partnership, to be formed	Month Year	THOMSON
⊠ corporation ☐ business trust ctual or Estimated Date	☐ limited partnership, to be formed  of Incorporation or Organization:	Month Year 0 2	THOMSON
⊠ corporation ☐ business trust ctual or Estimated Date	☐ limited partnership, to be formed	Month Vear 0 3 0 2  I Service abbreviation for State;	THOMSON

15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was malled by United States Registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

## State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

## A. BASIC IDENTIFICATION DATA (cont)

- 2. Enter the information requested for the following:
  - · Each promoter of the issuer, if the issuer has been organized within the past five years;
  - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
  - Each executive officer and director of corporate general and managing partners of partnership issuers; and
  - · Each general and managing partner of partnership issuers.

Check Box(es) that apply: ☐ Promoter Ø Beneficial Owner	☑ Executive Officer	⊠ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		•	
Winfrey, James N. Business or Residence Address (Number and Street, City, State, Zip Code)	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
1700 West Loop South, Suite 1445, Houston, Texas 77027			
Check Box(es) that apply: ☐ Promoter ⊠ Beneficial Owner		☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Cherry, Alton L.			
Business or Residence Address (Number and Street, City, State, Zip Code) 1700 West Loop South, Suite 1445, Houston, Texas 77027			
Check Box(es) that apply: ☐ Promoter Beneficial Owner ☐	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual) Hunt Capital Growth Fund II, L.P.			
Business or Residence Address (Number and Street, City, State, Zip Code)			
1601 Elm Street, 4000 Thanksgiving Tower, Dallas, Texas 75201			<b>D</b> • • • • • • • • • • • • • • • • • • •
Check Box(cs) that apply: ☐ Promoter ☑ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual) KCEP Ventures II, L.P.			
Business or Residence Address (Number and Street, City, State, Zip Code)			
Country Club Plaza, 233 West 47th Street, Kansas City, MO 64112  Check Box(es) that apply:   Promoter Beneficial Owner	☐ Exceutive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zip Code)			
Check Box(es) that apply:  Promoter  Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if individual)			
Business or Residence Address (Number and Street, City, State, Zlp Code)			
Check Box(es) that apply:   Promoter   Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if individual)		·	
Business or Residence Address (Number and Street, City, State, Zip Code)			

(Use blank sheet, or copy and use additional copics of this sheet, as necessary.)